(f) the proactive-steps Government would propose to improve the situation?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) As per the survey conducted by the National Sample Survey Organisation (NSSO) in 43 districts of the country, 39.23% Primary Health Centres (PHCs) and 66.51% Community Health Centres (CHCs) have Operation Theater and 46.30% PHCs and 90.79% CHCs have Operational Pathological Labs. 26.3% PHCs and 46.9% CHCs have exclusive tap water source. 17.5% PHCs and 12.3% CHCs, as per the survey has private hand pump and 32.6% PHCs and 12.9 CHCs have public hand pump as the source of water.

(d) to (f) Keeping in view the poor conditions of the health facilities, Government has launched National Rural Health Mission [NRHM] under which upgradation of facilities, support to infrastructure, supplementary manpower etc., have been taken up. Under the NRHM, an amount of Rs. 25,000/- per PHC has been approved as united fund for local health action. Also, Annual Maintenance Grant @ Rs. 50,000/- per PHC has been approved for maintenance and improvement of physical infrastructure of PHCs. For upgradation of CHCs to Indian Public Health Standards (IPHS), the funds have been provided to all the States/UTs as per the State Governments Annual Project Implementation Plan under NRHM. Monitoring and Evaluation of the progress made *vis-a-vis the* release of funds is also one of the approved activities under NRHM.

Alcoholism and health

2642. SHRI B.K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a recent study conducted by NIMHANS and WHO reveal that alcoholism has assumed epidemic proportions in the country;

(b) whether the study finds that the age of the onset of drinking has fallen from the earlier 29 to present 19 years and whether almost 33 per cent of the population consume alcohol regularly; and

(c) whether the evils of alcoholism on citizen' health... productivity

and domestic well being taken together far outweigh the revenue earned by Government through excise on alcoholic products as in the case of tobacco?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) This study was conducted on 7912 household covering 28507 individuals from rural, town, slum and urban areas in Karnataka. Among the male age group of 16 to 60 years, nearly 33% of the adult population regularly consumed alcohol.

There has been a significant lowering of age at initiation of drinking. Data from Karnataka showed a drop from a mean of 28 years to 20 years between the birth cohorts of 1920-30 and 1980-90. Alcohol sales have registered a steady growth rate of 7-8% in the past three years. Alcohol has significant effects on the individual and society leading to social and health consequences. Alcohol has been linked to more than 60 health conditions and several alcoholic use social, economical and health conditions. It is linked with cancer, liver cirrhosis, HIV infection, tuberculosis, esophageal cancer, liver disease and duodenal ulcer; Alcohol misuse wreaks a high social cost. Psychosocial consequences include work related problems, effects on children, increased mental morbidity in family members. From a small study in the state of Karnataka, it was observed that the social costs of alcoholism far exceeded the revenues generated from alcohol.

Autonomy of AIIMS

2643. MISS MABEL REBELLO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether by curtailing autonomy of AIIMS, scientific and medical atmosphere is vitiated to conduct research and other specialised work of AIIMS; and

(b) if so, the reasons for not amending the original Act of AIIMS which was enacted 50 years ago, with the change of time and with the change in the atmosphere of medical profession?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) The All India